

# HEALTH PROMOTION & PREVENTION INITIATIVES NEWSLETTER



Issue No. 16

January - February 2006

## Initiative Spotlight



### Relevance of Active Duty Asthma Management Programs

#### The health issue

Effective asthma control is an important concern for Active Duty Soldiers. Soldiers that cannot pass the APFT or wear a protective mask because of asthma must go before the medical board. It is critical that healthcare providers identify triggers for each Soldier's asthma and ways to control these triggers.

If the triggers can be controlled, the asthma can be controlled. If the triggers can be controlled, then Soldiers remain deployable and can be retained in the Army. This is critical because Soldiers cannot remain in the Army now if they have a profile for asthma.

#### What should an effective asthma management program include?

The most effective hospital-based asthma management programs integrate inpatient, outpatient and emergency department personnel and processes. Provider education should be based on DoD/VA Clinical Practice Guidelines. Primary care manager participation is crucial to a successful asthma management program.

An Active Duty asthma clinic should utilize the resources of the family practice and allergy clinics to track and treat Active Duty Soldiers with asthma. The goal of the Active Duty clinic should be to optimize therapy and ensure adequate follow up of these patients to avoid last minute deployment issues. Patients can be identified using data in CHCS.

#### Demonstration of program effectiveness or impact

Data from pediatric asthma management programs indicates that pediatric inpatient dispositions for asthma have decreased 50%. Emergency Department (ED) visits for pediatric asthma similarly decreased. Validated surveys have shown a 22% increase in perceived quality of life. Long-term controller use has nearly doubled, as measured by record review. These positive program results have resulted in many costs being avoided.

## Ideas from the Field

### Health promotion and the line

Go to line Commanders and ask:

How can Health Promotion help make your Soldiers more ready to deploy?

Work with line personnel to provide deployment health information, on-site screenings, briefings on local health threats, and immunizations. Connect Health Promotion personnel and line leadership; then, keep those lines of communication open. Build those connections before the SRP process begins.

## Prevention Resources

DoD/VA Clinical Practice Guideline  
– Asthma

<http://www.qmo.amedd.army.mil/asthma/asthfr.htm>

National Heart, Lung, and Blood  
Institute – Guidelines for the Diagnosis  
and Management of Asthma

<http://www.nhlbi.nih.gov/guidelines/asthma/asthgdln.htm>

Partners in Information Access for the  
Public Health Workforce – Respiratory  
diseases literature review

<http://phpartners.org/hp/respiratory.html>

## Did You Know?

Research indicates that signs are an effective motivator for behavior change involving **point-of-prompt decisions**, like choosing between the stairs or the elevator. In one study, according to the Guide to Clinical Preventive Services, signs placed by elevators and escalators increased the percentage of people taking the stairs by 54%.

Go to [http://www.cdc.gov/nccdphp/dnpa/stairwell/motivational\\_signs.htm](http://www.cdc.gov/nccdphp/dnpa/stairwell/motivational_signs.htm) to download some stairwell signs and get other easy-to-implement ideas to affect point-of-prompt decisions.

## Don't Reinvent the Wheel!



### Deployment Health and Family Readiness Library

This DoD online library provides service members, families, veterans and healthcare providers an easy way to quickly find deployment health and family readiness information. Resources include: pandemic influenza fact sheets for unit leaders, Hurricane Katrina preventive medicine Soldier tip cards, fact sheets on infectious diseases and toxic material hazards, and family support information for redeployment.

Access the library at: <http://deploymenthealthlibrary.fhp.osd.mil/home.jsp>.

## HPPI News & FAQs

### FY06 REQUEST FOR PROPOSALS

Applications for the HPPI FY06 Request for Proposals (RFP) will be accepted through 9 January 2006. **Late submissions will not be accepted.**

Go to: <http://chppm-www.apgea.army.mil/dhpw/Population/HPPI.aspx> to submit a HPPI FY06 application.

Applicants in the following areas are especially encouraged to apply:

- spiritual well-being;
- STIs/HIV education;
- weight management for teenagers/young adults;
- health promotion in times of deployment; and
- Army National Guard and Army Reserve health promotion, wellness, and prevention.

In addition, initiatives are being sought in the following areas:

- improved processes that reduce lost duty time through increased efficiencies in the delivery of health promotion and/or health care



- health promotion programs that directly use HEAR/HART data for health promotion program targeting and implementation
- efficient and effective marketing means that get health promotion and prevention information out to a wide audience
- the 'better way' that improves efficiency of existing activities like influenza prevention and the medical aspect of the SRP process

HPPI funds will only be awarded for established, ongoing health promotion initiatives.

Visit the HPPI web site at <http://chppm-www.apgea.army.mil/dhpw/Population/HPPI.aspx> for complete FY06 RFP information.

For more information about HPPI, or to see past issues of the HPPI newsletter, visit <http://chppm-www.apgea.army.mil/dhpw/Population/HPPI.aspx>.

To subscribe to this newsletter or send comments/suggestions send email to: [hppi\\_program\\_info@amedd.army.mil](mailto:hppi_program_info@amedd.army.mil)

or call DHPW at (410) 436-4656, DSN 584-4656.

Non-government web sites listed in this newsletter do not in any way constitute Department of Defense endorsement of the private entity, its web site, or its products.